

## ALSAGER URBAN DISTRICT COUNCIL

REPORT

ON THE

Health and Sanitary Circumstances of the District

FOR THE

YEAR ENDED 31st. December 1968.

1. Dr. Didsbury G.407
2. Mr. Morley Parry A.421
3. Mr. Perry A.405

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MEDICAL OFFICER OF HEALTH

SURVEYOR AND PUBLIC HEALTH INSPECTOR

DEPUTY SURVEYOR AND PUBLIC HEALTH
INSPECTOR

- L. RICH, M.B., Ch.B., M.R.C.O.G. D.P.H.

- A. JAMIESON, M.R.S.H. M.A.P.H.I.

- J.B. MELLOR M.A.P.H.I.

To the Chairman and Members of the Alsager Urban District Council, Mr. Chairman, Ladies and Gentlemen,

I have the honour to present to you the Annual Report on the Health and Sanitary Circumstances of the Urban District for the year 1968.

The population of the District has now gone over the 10,000 mark and there has been an increase of 330 in the estimated population. There has been an increase in the number of births and a fall in the number of deaths but the overall increase in population is due to a steady influx of people into our District.

It is increasingly evident that Alsager is a very attractive place to live in and has a very good health record. As pointed out last year it is an ideal place for people to live in who work in the surrounding areas with good road and rail communications. We are now in the process of the great debate on Local Government Reorganisation and it is right that we should look back on the achievements of the Alsager Urban District Council over the past years. We are in the nature of things 'in the dock' so that we can justify our continued existence and I am certain that the case for Alsager remaining as an independent Authority is very strong.

Over the years the Council has assisted in the provision of attractive private development estates as well as good looking Council houses and bungalows. Has provided sites for new schools, a clinic centre, a library at present in course of erection with a site adjacent for a ner community hall and has recently sold a further site in Meads Road to the County Education Authority for the provision of a new primary school to replace the Bankside School.

It must also not be forgotten that by the acquisition of the Milton House site we made available the land for the building of the new County Home which is amongst the finest in the Country. The Council have under consideration inco-operation with the County Council the provision of a new sports complex to include a swimming bath adjacent to the enlarged Secondary School, hereto progress is envisaged in that the Secondary School is to be developed into a Comprehensive School.

A further very important piece of prgoress is the decision of the Council to convert the 142 flats on the Longview Estate into modern dwellings with a choice of gas fire heating or central heating provided by electricity, solid fuel or gas. In addition the whole of this estate which was acquired from the Ministry of Supply is being re-roofed and this work is well on the way to being completed.

One could go on extolling the virtues of Alsager with justifiable pride but I am certain that nobody could justify its abolition as an independent Authority. The people have ready access to their elected representatives and all the Officers of the Council are readily at hand to deal with their personal problems. How can the people hope to get such a service within a large conurbation.

The report of your Public Health Inspector and Engineer makes very satisfactory reading indeed. Now that a start has been made on the sovery works and the refuse disposal plant, within the course of the next twelve to eighteen months two of our major problems will have been solved. The scheme to provide a new sowage works was begun in 1958 and it has taken nearly ten years to get off the ground. Much of this delay could be attributed to hold ups by the Ministry.

I am particularly pleased with the success of the experiment of using binliners in our refuse disposal scheme and I am certain that once the whole district is catered for in such a manner the health and hygiene of refuse collection will be much improved.

As for infectious disease apart from measles there was practically no incidence and even here we are now finding that the number of cases are falling with the increasing take up of immunisation against this disease.

It was mentioned in the last Annual Report that it was planned to begin a Family Planning Unit in our Clinic. This is still in our minds and it is hoped to be able to get it into the estimates for next year.

Once again I would like to thank both Mr. Jamieson and Mr. Mellor for their assistance in the preparation of this report and for their help in enabling me to carry out my duties. I know that I can reply on them both implicitly from the high quality of the work they both do and in reverse I am always ready and available to given them both whatever help I can. As for Mr. Heap, our Clerk, he has always over many years been a very great help to me in explanation of what the Council intend to do and I rely on him greatly for advice and guidance on the particular parts of the work of the Council that are my responsibility.

I beg to remain, Your obedient Servant,

L. RICH, Medical Officer of Health.

(The figures in brackets throughout this report are for 1967)

### STATISTICS AND SOCIAL CONDITIONS

### Extracts from Vital Statistics

Istimated Population ... 10290 (9960)

Births			tal	M	ale	Female	
Live Births	Legitimate	169	(161)	81	(81)	88	(80)
	Illegitimate	6	(6)	6	(4)		(2)
Still Births	Legitimate	_	(1)	_	(-)	-	(1)
Contract of the	Illegitimate	-	(-)	-	(-)	-	(-)

Live birth rate per 1,000 estimated average population mid. 1969 14.2 (14)
Live birth rate for England and Wales per 1,000 of the population 16.9 (17.2)
Still birth rate per 1,000 total (live and still) births - (5.9)
Still birth rate for England and Wales per 1,000 total (live and still)
births 14 (14.8)

Still birth rate per 1,000 total population - (.1)

### Infantile Mortality

The total number of deaths is shown as follows:-

	Total	Male	Female
Legitimate	2 (2)	1 (2)	1 (-)
Illegitimate	- (-)	- (-)	- (-)

Infantile mortality rate per 1,000 live births 11.4 (11.9)
Infantile mortality rate for England and Wales 18 (18.3)
Legitimate infants per 1,000 legitimate live births 11.8 (12.4)
Illegitimate infants per 1,000 illegitimate live births - (-)

#### Deaths

	Total	Male	Female	
Deaths (all ages)	74 (87)	40 (52)	34 (35)	

Death rate per 1,000 estimated average population 11.1 (12)

Death rate for England and Wales per 1,000 of the population 11.9 (11.2)

The following table shows the deaths from all causes within the district during the past year:-

Cause	Total	Male	Female
Cholera	_	_	_
Typhoid Fever			_
Bacillary Dysentery and amoebiasis			
Enteritis and other diarrhoeal diseases			
Tuberculosis of repiratory system			_
Other tuberculosis, including late effects			_
Plague			
Diphtheria			_
Whooping Cough	_		_
Streptococcal sore throat and scarlet fever	_		_
Meningococcal infection	_	_	-
Acute policayelitis		_	_
Smallpox	-	_	_
Measles	_	_	-
	-	_	_
Typhus and other rickettsioses	-	_	_
Malaria	-	_	-
Syphilis and its sequelae	~	_	-
All other infective and parasitic diseases	-	_	_
Malignant neoplasms	11	8	3
Benign neoplasms and neoplasms of	4.0	_	-
unspecified nature			
Diabetes Mellitus	2	-	2
Avitaminoses and other nutritional	_	-	-
deficiency			
Anaemias	-	-	-
Meningitis	_	-	_
Active rheumatic fever	n.eb	_	-
Chronic rheumatic heart disease	1	-	1
Hypertensive disease	1	_	1
Ischaemic heart disease	11	8	3
Other forms of heart disease	5	1	4
Cerebrovascular disease	12	4	8
Influenza	_	_	_
Peneumonia	7	3	4
Bronchitis, emphysema and asthma	5	4	1
Peptic ulcer	_	_	-
Appendicitis	_	_	_
Intestinal obstruction and hernia	1	_	1
Cirrhosis of liver	_	_	-
Nephritis and nephrosis	2	1	1
Hyperplasia of prostate		_	_
Abortion	dicte	_	~
Other complications of pregnancy, childbirth			
and the puerperium	_	446	-
Congenital anomalies	_	_	_
Birth injury, difficult labour and other			
ranoxic and hypoxic conditions	1	1	_
Other causes of perinatal mortality	_	_	_
Symptons and ill-defined conditions	2	1	1
All other diseases	12	8	4
Motor vehicle accidents	12		-
	1	_ 1	
All other accidents	1	Т	
Suicide and self-inflicted injuries	_	_	
A'l other external causes	-	-	
M_ ± - 7	7.4	40	34
Total	74	40	54

Deaths from Pueperal and Maternal causes:-

	No.	of	Deaths
Puerperal Sepsis Other Maternal causes	0		(o) (o)

Meternal mortality rate per 1,000 live and still births 0 (0)

### GENERAL PROVISIONS OF HEALTH SERVICE FOR THE

### Care of Mothers and Young Children

Health Visitors

Miss. H.M. Furness, Clinic Centre, andbach Road South, Alsager. Tel. Alsager 3215.

Miss. B. Richardson, Clinic Centre,
Sandbach Road South, Alsager.
Tel. Alsager 3215.

Mrs. B.M. Doorbar, Clinic Centre, Sandbach Road South, Alsager, Tel. Alsager 3215.

### Child Health Clinics

It is probable that in the future there will be various types of clinics providing a preventive clinical medical service in the County. It is likely that they will include child health, psychiatric, geriatric, middle-aged or "enticipatory" geriatric clinics. Of these the first to evolve will be the child health clinic.

The need for child welfare clinics, infant welfare clinics, well baby clinics etc. has been the subject of much discussion since the advent of the National Health Service. The facts that the clinic doctor could no longer issue prescriptions and in the case of a child who was ill could do little more than advise that the child be seen by a general practitioner were those used as arguments for the abolition of clinics. Various proposals have been made and different experiments carried out. In 1964 the Standing Medical Advisory Committee of the Central Health Services Council established a Sub-Committee on Child Welfare Centres under the Chairmanship of Sir Wilfred Sheldon who published a report late in 1967 entitled "Child Welfare Centres", and generally known as "The Sheldon Report".

#### THE SHELDON REPORT

Few of the conclusions or recommendations of the Sheldon Report were new but at least they were set down as definite recommendations by an authoritative body, most of the recommendations of the report have been accepted by the County Health Department, and it is along the lines indicated by Sheldon that it is intended to develop the Child Health Service in Cheshire.

The main recommendation of the Sheldon Report was

"We are in no doubt about the continuing need for a preventive service to guard the health of children. We consider it would be more appropriate to describe it as a child health pervice than a child welfare service. It is our view that in the long term it will be part of the family health service provided by family doctors working in groups from purpose built family health centres. It is within this concept that our recommendations are made".

The County Health dpartment agrees wholeheartedly with this statement and this recommendation summarises the County's policy. The Health Committee is committed to the establishment of health centres and these will provide accommodation for general practitioner services and for local health authority services. It is envisaged that more and more general practitioners will become involved in the local authority services of which the child health service is one.

Since 1967 each child born in Cheshire is registered on the Computer which then arranges for the children to be called for immunisation either at the Clinic or by their own family doctor whichever the parent chooses.

We shall also use the Computer to make special appointments for the Child Health Clinic so that the child can be assessed at regular periods during its' early years and finally round about the age of 4½ it will have a pre-school final medical assessment so that the teachers will know of any medical matter which is important in relation to the child's education.

Once again I would like to thank all our voluntary helpers at all the Clinics so ably lead by Councillor Mrs. Harper and Mrs. Allibone and I am grateful to all of them for their support they readily give me. We shall almost certainly need their continued help when we come to establish our Family Planning Unit and I am certain that I can rely fully on this.

I would also like to thank the W.R.V.S., members who continue so regularly in the Meals on Wheels service.

#### Statistics

		New C	lases	Tot	Total Attendances			Cases seen	Q	Average attendance
	0-1	1-2	2 <b>-</b> 5	0-1	1-2	2-5	- Clinics held	by Dr.	clinic seen by Doctor	per Clinic
Infant Welfare Clinic	240 (200)	(-)	(-)	30 <b>7</b> 4 (2926)			104 (102)	4 <b>1</b> 5 (458)	8 (9)	44.5 (43.4)

### Special Clinics for under 5

	New Cases	Total Attendances	No. of Clinics held	Average per Clinic
Ophthalmic Clinic	18 (23)	33 (63)	1.0 (5)	3.3 (12.6)
E.N.T. Clinic	14 (20)	15 (27)	10 (11)	1.5 (2.4)

### Special Clinic for School Children

	New Cases	Total Attendances	No. of Clinics held	Average per Clinic
Ophthalmic Clinic	21 (39)	109 (119)	10 (12)	10.9 (9.9)
E.N.T. Clinic	28 (45)	158 (171)	10 (11)	15.8 (15.5)

Preparation Class

	New Cases	Total Attendances	No. of Clinics held	Average per Clinic
Preparation Class.	69 (84)	481 (52 <b>7)</b>	48 (50)	10 (10.5)

### Welfare Foods Sold - 1968

Distribution Centre		Dried Milk Half cream	A & D Tablets	Cod Liver Oil	Orange Juice
Welfare Centre	750 (566)	23 (25)	143 (341)	378 (147)	5051 ( 5113)
Lawton Road (W.R.V.S.)	61 (69)	(-)	8 (32)	39 (10)	288 (368)

### Mid.ifery

Midwife - Mrs. E.L. Pedley, 6 Audley Road, Alsager, Tel. Alsager 2583

Once again it is particularly satisfactory to report that a full years work has been achieved without any maternal death.

I would also draw attention to the continued popularity of the Preparation Classes.

### Births 1968

Но	spital	H	lome	Private N. Home		
Live	Still	Live	Still	Live	Still	
150 (128)	(1)	31 (35)	(-)	(4)	(-)	

### Home Nursing

The District Nurses for Alsager are - Mrs. E. Weatherall, 27, Cresswellshawe Road, Alsager. Tel. Alsager 2067.

Mrs. A.M. Skellam (Relief) 28, Birch Avenue, Alsager. Tel Alsager 2582.

The Home Nurses work under the direction of the family doctor and looks after patients in their own homes. Because of this many cases who otherwise would have to be admitted to hospital are dealt with at home. This work helps considerably in reducing the strain on the hospitals. Once again it is with pleasure that I have to report that no single complaint was received during the year.

Completed Primary Courses - Persons Under age 16
(South East Cheshire)

G 0 77	Year of Birth		Others	T	otal			
Type of Vaccine	1968	1967	1966	1965	1964-61	under 16	At Clinics	By G.P's.
Quadruple	_	_	-	ecom.	-	_	-	grea.
Triple (D/W.C./T)	383	901	70	28	33	109	439	935
Diphtheria/Thooping Cough	-	-	-	-		-	-	-
Diphtheria/Tetanus	- 1	5	3	_	17	5	-	30
Diphtheria	-	-	_	W77. <b>0</b>	4270	-	-	-
Whooping Cough	-	-	_	-	_	-	-	ton
Tetanus	-	-	-	-	2	16	-	18
Polio-Salk		-	-1	-	_	-	-	-
Polio-Sabin	268	903	79	30	146	13	572	867
Measles	***	320	522	369	647	31	1170	719

### Reinforcing Doses - Persons Under Age 16 (South East Cheshire)

m o II		Yea	r of	Birtl	n	Others	T	otal
Type of Vaccine	1968	1967	1966	1965	1964-61	under 16	At Clinics	By G.P's.
Quadruple	-	_	_		_	_	-	-
Triple (D/W.C./T)	-	192	269	52	512	13	382	656
Diphtheria/Thooping Cou <b>g</b> h	-	_		_	-	-	-	-
Diphtheria/Tetanus	<del>-</del>	5	60	58	325	39	273	214
Diphtheria	-	-	-	-	_		-	-
Whooping Cough	-	m.a	-	-		-		-
Tetanus	6.00	1	1	-	13	84	-	99
Polio-Salk			-	-	~•	-	-	-
Polio-Sabin	_	155	280	53	775	54	603	714

### Smallpox Vaccination - Persons Under Age 16 (South East Cheshire)

		lear c	of Birth		Others under	Total	At	Byd G.P's
	1968	1967	1966-64	1963-54	16	TOTAL	Clinics	G.P's
Vaccinated	5	516	304	65	30	920	399	521
Re-vaccinated	-	-	4	16	21	41	con .	41

### Ambulance Service

I am well satisfied with the general turn-out and maintenance of the ambulance.

### Domestic Help Service

Statistics relating to the Home Help Service provided during 1968 are as follows:-

Home Helps employed during 1968

Full time - (-)
Part time 30 (30)
30 (30)

Home Helps employed at 31st December 1968

Full time - (-)
Part time 21 (22)
21 (22)

Applications received during 1968

Aged and Infirm

Chronic Sick 2 (2)
Mentally Disordered - (1)
Maternity 3 (7)
Others <u>11 (8)</u>

32 (41)

16 (23)

Cases attend during 1968

Aged and Infirm 55 (53)
Chronic Sick 10 (9)
Mentally Disordered 1 (1)
Hotermity 1 (6)
Others 14 (7)
81 (76)

Cases receiving attention at 31st December 1968.

Aged and Infirm 33 (41)
Chronic Sick 11 (7)
Mentally Disordered 1 (1)
Maternity - (-)
Others 5 (1)
50 (50)

### PREVALENCE OF AND CONTROL OVER DIFECTIOUS DISEASE Notifiable Diseases (other than Tuberculosis) during the year 1968

						Age	Dist	ribu	utior	1				0
Disease	Under	1-		3 <b>-</b>	4-	5-	10-	15-	20-	35-	45-	65 & over	Total	Cases admtd. to Hosp.
Erysipelas	-	-	-		_			-	-	-	1	-	1	-
Measles	~-	4	3	3	2	20		444	-	-	-	-	32	-
Meningococcal Infection	-	-	-	-	-			1	-	-			1	-
Pneumonia	1	_	-	_		-					1	tood	2	-

### Tuberculosis

For comparative purposes I have recorded the notifications of Tuberculosis during 1968 in conjunction with the notifications of this disease received each year since 1959.

Notifications - 1959 to 1968

	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968
	P NP	P MP	P MP	P NP	P NP	P NP	PNP	P NP	PNP	PNP
MALE										
Up to 1 year										
1 - 5										
5 - 15										
15 - 25									1	
25 - 35	1							1		
35 - 45									1	
45 55										
55 - 65	1		1							
65 & Over										
FEVALE										
Up to 1 year										
1 - 5										
5 - 15										
15 - 25						1				
25 - 35					1					
35 - 45						1 1				
45 - 55						1				
55 - 65						1				
65 % over										
Total	2 -	-   -	1 -	-   -	1 -	3 2	-   -	- 1	2 -	-   -

Deaths - 1959 to 1968

	19	959	19	60	19	61	19	962	19	63	19	964	19	65	19	966	19	967	19	68
		-	-	-				1	1					,				NP	<del>,</del>	
MALE																				
Up to 1 year																				
1 - 5																				
5 - 15																				
15 - 25																				
25 - 35																				
35 - 45					٠,		• •													
45 - 55																				
55 - 65			ı		1						1									
65 & over							1													
FEMALE																				
Up to 1 year																				
1 - 5																				
5 - 15																				
15 - 25															Baseman					
25 - 35																				
35 - 45																				
45 - 55																-				
55 - 65																				
65 & over															1					
Total	-		-	-	1		1	_	-	-	1	-	-	-	-	-	-			

Cases on the Tuberculosis Register at 31st December 1968 vere as follows:-

	Up to 1 yr.	1-4	5-14	15-24	25-34	35-44	45-54	55-64	65 & over	Total
Male Pulmonary	one one	derit	desk	-	1	3	2	2	2	10
Female Pulmonary	-			1		4	-	-		5
Male Non-Pulmonary	-	**		2	2			1	-	5
Female Non-Pulmonary			-	2		-	2	1		5

### Water Supply

Alsager is supplied with River Dec water from Hurleston via a booster station at Gorsty Hill.

Regular bacteriological samples are taken in all districts. The water has been satisfactory both in quantity and quality.

Further housing development has continued at Fairway Gardens Estate and a short 4" link up main laid along Wilbraham Way to Eaton Road.

### Sewerage and Sewage Disposal

The existing two sewage works maintained by the Council situated at Day Green and Longview are, as previously reported, seriously overloaded. It is, however, pleasing to report that at long last a new proposed sewage works, which has been necessary for many years, has been advertised inviting tenders and it is anticipated by our consultants, V.H. Radford & Son, Civil Engineers, Nottingham, that the works should be in operation by 1970.

### Refuse Collection and Disposal

A further 96 new houses here erected during the year but by instituting over a trial area of approximately 500 dwellings, a system of plastic bin liners, it has been possible to attain a neekly collection for the first time. The attitude of the public to the plastic bin liners is most encouraging and also that of the refuse collectors, and it is hoped that after the experimental period is over the Council will retain and extend the scheme as the district grows.

Disposal is by tipping with a limited amount of control and gives rise to complaints, and further, due to residential development now being carried out in close proximity this will seriously aggravate the position.

Due to this unsatisfactory method of disposal and to difficulties encountered in respect of sludge disposal in the proposed new sewage works, the Consultants have submitted and the Council has approved a scheme of refuse disposal by pulverisation to which will be added sewage sludge. The scheme has been approved by the Ministry of Housing & Local Government and has been included in the contract documents for the sewage disposal works.

#### Food and Drugs

During this period 29 visits have been made to food premises and there appears to be a reasonable standard of food hygiene observed by the traders.

During this year 36 lbs of various foods have been condemned.

### Offices, Shops and Railway Premises Act 1963

Complete inspections have been carried out of all premises to which the above Act requires, viz:-

Class of Premises	Number of premises registered during the year	Number of registered premises at end of year	Number of registered premises receing a general inspection during the year
Offices	1	14	4
Retail Shops	1	48	28
Wholesale Shops Warehouses	-	-	-
Catering establishments open to the public, canteens	÷	1	1
Fuel Storage Depots	•		-
Total	2	63	33

Total number of visits of all kinds by Inspector to Registered Premises under the Act. 52

### Housing

By the 31st December, 1968, there were 112 dwellings which do not possess the standard amenities and of these the majority are owned/occupied by retired ersons on fixed incomes and they feel that they are not prepared nor have they the financial backing to instal the essential amenities. One feels that it should not be the case of the lack of finance preventing people from having the essential amenities.

The Council have received four applications for Standard Grants and two applications for a Discretionary Grant during 1968, and the amount paid on the completed improvements was £719 (estimated final amount to be raid when all improvements have been completed is £1,139). These grants provide for the undermentioned amenities:-

(پن	Fixed Bath	5
b)	Jash Hand Basin	5
c)	Hot Water Supply (to any fittings)	6
d)	Water Closet (within the dwelling)	5
e)	Food store	1

No applications have been received for Certificates of Disrepair.

### Slaughterhouse Act

There is one private slaughterhouse in the district.

Carcases and offals inspected and condemned in whole or in part, are set out below:-

	Cattle	Cows	Calves	Sheep	Pigs
Animals slaughtered and inspected	475	340	9	2 <b>,</b> 319	566
Condemations					
l) All disease except Tuberculosis & Cysticerci					
Whole carcases condemned	-	-	1	_	_
Carcases of which some part or organ was condemned	214	127	-	199	41
2) Tuberculosis only Whole carcases condemned		-		-	-
Carcases of which some part or organ was condemned.	1	-	-	-	1.

Cysticerus Bovis	Cattle Ex. Cows	Cows
a) Localised	5	2
b) Generalised		
	5	2

		weight - 1bs		
Disease	Beef	Veal	Mutton	Port
Tuberculosis	89	0.00	_	12
Parasites and Cysts	3,319	_	211	12
Angioma	204		_	-
Dropsy	<u>-</u> '	-	_	
Emaciation	_	50	-	_
Traumatism	<del>-</del>		-	-
Inflamation	_	_	4	2
Moribund	_	_		_
Immaturity	_	_	-	_
Actinomycosis	46	-		-
Pericaditis	4	_	-	5
Peritonitis		_	_	_
Pleurisy	5	_	_	_
Pneumonia	11	-	6	46
Septicaenia	-	_	_	_
Fyaemia	- 9	_	_	-
Sapraemia	_	-	-	-
Manmitis	-	outs.	_	_
Tumours	_		_	-
Fever	-	_	-	_
Decomposition	_		-	-
Miscellaneous	475	_	5	6
Abscesses	240	-	-	-
Totals	4,393	50	226	92

In addition to the above, five butchers shops sell meat which is not slaughtered within the district.

# Summary of Visits made to and Inspections of Various Premises

. . ...

Rodent Control Insect Control Pet Animals Act. Petroleum Storage Schools Verm. and Dirty Premises Interviews Special Visits Noise Roadworks Building Inspections etc. Improvement Grants - Standard Improvement Grants - Discretionary Housing - Repairs and defects Housing Application, Terminations and exchanges Housing Drainage Housing Refuse Collection and Disposal Housing Smells Housing Slum Closrance	Visits 39 2 22 22 142 - 4 215 174 18 3 - 18 20 2	Inspections  6  33 47 2
	2 - - 8	2 2 20

### Factories

			l	
Premises	No. on register	No. of visits	No. of written notices	No. of Occupiors prosecuted
(1) Factories in which section 1,2,3,4 and 6 are to be enforced by Local Authority	8			
(2) Factories not in- cluded in (1) in which section 7 is enforced by Local Authority	-	20		
(3) Other premises in which section 7 is enforced by Local Authority	10			
Total	18	20	-	-

